St. Bartholomew's





Tourrag.

Vol. XII.—No. 2.]

NOVEMBER, 1904.

[PRICE SIXPENCE.

St. Bartholomew's Yospital Journal,

NOVEMBER 1st, 1904.

"Æquam memento rebus in arduis Servare mentem."—Horace, Book ii, Ode iii.

Calendan.

Wed., Nov. 2.-Clinical Lecture, Mr. Lockwood. "Exploratory Laparotomy: especially for Carcinoma. Thurs., " 3.—Abernethian Society. Dr. W. J. Gow, "Labour complicated by Pelvic Tumour."

St. B. H. Christian Association. "A Remarkable Interview," Rev. Griffith Thomas, B.D. Fri., -Clinical Lecture, Dr. West. Sat., 5.-R.F.C. v. Upper Clapton, at Walthamstow. -Special Lecture, Mr. Harmer. "On the Tonsil." -R.F.C. "A" team v. Blackheath "A." Clinical Lecture, Mr. Lockwood. "Urethrotomy." Mon., Wed., -St. B.H.C.A. Address by W. B. Wakefield, Esq. Abernethian Society. Dr. Branson, "Clinical Sig-nificance of Vomiting in Childhood." Thurs., Fri., " 11.—Clinical Lecture, Sir Dyce Duckworth. -A.F.C. v. Wellingborough Masters. R.F.C. v. Guildford, at Winchmore Hill. Sat., Hockey Club v. West Herts, at Watford. ,, 14.—Special Lecture, Dr. Ormerod. "Skin Cases." Mon., " 16.-Clinical Lecture, Mr. D'Arcy Power. jejunostomy: the After Results."
A.F.C. v. Hastings, at Hastings.
R.F.C. "A" team v. Guy's "A," at Honor Oak. St. B. H. Christian Association Missionary Meeting. Thurs., Abernethian Society. Clinical Evening.,, 18.—Clinical Lecture, Dr. Norman Moore. Fri., " 19 .- A.F.C. v. Old Reptonians at Winchmore Hill. R.F.C. v. Bedford, at Bedford. Hockey Club v. Sevenoaks, at Sevenoaks. " 21.—Special Lecture, Mr. Eccles on "Spinal Caries." Mon., " 23.-Clinical Lecture, Mr. D'Arcy Power. "Gastro-Wed., jejunostomy: the After Results."
A.F.C. v. Royal Naval College, at Greenwich.
Hockey Club v. R.M.A., at Woolwich.

" 24.—Abernethian Society. Dr. Tooth, "Exact Localisa-

tion of Lesions in the Spinal Cord."

" 26.-A.F.C. v. Old Cholmleians, at Winchmore Hill.

Hockey Club v. Berkshire Gents., at Reading.

R.F.C. v. Old Leysians, at Eltham.

,, 25 .- Clinical Lecture, Dr. Samuel West.

" 27.—Advent Sunday.

Thurs.,

Fri., Sat.,

Sun.,

Editorial Notes.

LAST month we said farewell to two members of the medical staff of the Hospital; we must do the same this month to two members of the administrative staff, for the resignations both of the Treasurer, Sir Trevor Lawrence, Bart., K.C.V.O., and of the Clerk, Mr. W. H. Cross, B.A., of the Inner Temple, have been accepted at a Court of Governors. Neither of these resignations comes as a surprise, and now that the foundation stone of the new building has been laid, the time is well chosen. Many fresh difficulties would have arisen, had they resigned their important offices at any time during the last year; for our Hospital has passed through troubled times and has come out with flying colours, chiefly because it was St. Bartholomew's and it was in the right, but thanks also to the loyalty of many, and not least to the untiring energies of Sir Trevor Lawrence and Mr. Cross.

SIR TREVOR'S connection with the Hospital has been of long standing. He was a Student in the early fifties, and then joined the Indian Medical Service. He succeeded Sir Sydney Waterlow as Treasurer in 1892, and thus has held office for twelve years. He will always be remembered by Bartholomew's men for his unfailing courtesy and amiable disposition.

Mr. Cross was appointed Clerk to the Hospital in 1866, and so has been in office for thirty-eight years. It is difficult to appreciate the great responsibility which he has borne with such untiring energy during all these years.

It will be no easy task for the Governors to fill the vacant posts. The Hospital has had its crisis, and for its successful administration in the immediate future everything depends upon the choice of two able and experienced men of business who will carry on the work of reconstruction—both internally and externally—according to the approved plans. And, in this connection, we may urge that the sooner

a definite start can be made with the new buildings the better it will be for the Hospital. We hear many questions asked daily on this matter, both within the Hospital walls and outside. We are informed officially that those in authority are only waiting for the architect to fill in the details and specifications of the approved plans—which is no small undertaking,—and then estimates will be invited without any further delay.

It seems to us that the Governors will be wise if they publish abroad their need of a treasurer and a clerk, so that the element of competition may be introduced. Nothing short of the best should be good enough for St. Bartholomew's. There is no immediate hurry, and it would be the height of folly to accept of necessity the first names that are suggested, especially as both Sir Trevor Lawrence and Mr. Cross have generously offered to continue their services until such time as the new appointments are made.

The visit of the French physicians and surgeons to London has been the great event of the month, and St. Bartholomew's was honoured as the first hospital visited on the tour of inspection after the reception at the Royal College of Surgeons. A detailed account appears elsewhere.

WE were glad that no elaborate preparations were made—no set operations or demonstrations. They found us as we were, and they were pleased. One feature of the visit was that the University of London assumed an official position in the reception of the visitors, and Mr. Butlin, as Dean of the Faculty of Medicine, must be applauded for his public-spirited generosity in entertaining the guests at luncheon.

WE are pleased to have seen in the Students' Union smoking-room a valuable and lasting souvenir of the visit in the shape of a cartoon of the leaders of the medical profession in France. It was drawn by Monsieur Barrère, and very generously presented to the students of the Hospital by our visitors. We have taken the opportunity of reproducing the cartoon as an inset to this number of the Journal, so that our readers may appreciate its beauties.

Dr. Herringham has been appointed Physician and Dr. Drysdale Assistant Physician to the Hospital. We congratulate both most heartily, and we welcome Dr. Drysdale on his appointment to the staff, first of all for his personality, and secondly, because he combines the attributes of a clinical physician and of a pathologist. He has also an impressive way of teaching.

WE offer our heartiest congratulations to Mr. D'Arcy Power on his election as Surgeon to the Hospital.

SIR DYCE DUCKWORTH has been appointed Medical Referee to H.M. Treasury and Medical Adviser to the Pensions Commutation Board upon the resignation of Dr. Lionel Beale, F.R.S.

Mr. G. R. WILLIAMS and Mr. P. H. DUNN have taken the degree of M.D. at Durham University for practitioners of fifteen years' standing.

The Old Students' dinner was held on Monday, October 3rd, in the Great Hall, and was even more successful than usual. We publish a short account elsewhere, and also a letter from Dr. Herringham, the Secretary, asking for the opinions of old students on the subject of the price of the dinner. It seems to us, in our limited experience of such dinners, that Dr. Herringham is right, and that it would be impossible to make any other arrangements for a dinner in the Great Hall.

The Students' Union is holding its first smoking concert at the Holborn Restaurant on November 1st, and Dr. Herringham, the President, has kindly consented to take the chair. We regret that the concert will be over before we can offer our best wishes for its success. However, the Students' Union Dance is to be held on Thursday, December 6th, in the Wharncliffe Rooms, Great Central Hotel, and promises to be a success. Tickets, 10s. 6d. each, can be obtained from the Secretaries of the Students' Union or from the Stewards.

The number of subscribers to the first edition of Dr. Norman Moore's *History* is slowly creeping up, and we are of opinion that it is only want of opportunity that has hindered many more past and present Bartholomew's men from subscribing. Application forms can be obtained from the Secretary to the Appeal Fund in his room next the Great Hall. The reasons for subscribing to the first edition are (1) that the whole of the profits of the first edition will go to the Appeal Fund; (2) that the list of subscribers to the first edition will be published.

Arrangements are in progress for holding a Matinée performance at the Alhambra on December 8th on behalf of the Appeal Fund, and will be published in the daily papers in due course.

THE Smoking and the Reading Rooms are now kept open till 8 o'clock each evening. This is a great convenience for men who have to wait about the Hospital during the evening for any purpose.

WE are glad to notice more enthusiasm in the various clubs this session. The Rugby Football and the Hockey Clubs have opened their seasons well, and the Association Club, we hear, has prospects of better times in the near future.

The "Old Bart.'s doctors" in practice in Hastings, St. Leonards, Bexhill, and Battle have, through Mr. C. B. Gabb, invited our Association team for the twelfth time to a tea and smoking concert on the 16th inst. after the annual match v. the Hastings and St. Leonards F. C. So far the Hospital has won eight times, Hastings once, and there have been two drawn games. The match creates great interest in sporting circles in Hastings, and it is watched by a large crowd. The "gate" is given to the East Sussex Hospital. Mr. Manlove takes the chair at the festive gathering this year.

THE following is the additional list of Bartholomew's men who have subscribed to the General Fund and also to the Special JOURNAL Fund for the Pathological Block.

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The Daily Mail has reopened its campaign! Just as we were going to press we read a most appalling and scandalous article entitled "St. Bartholomew's Fiasco." It is written in true Daily Mail style (which everyone is learning now to value at its true worth), and almost every sentence from start to finish spells misrepresentation. Accuracy should be the first aim of a reformer, but with the Daily Mail sensation appears to be the most important aim. The comments, too, in the leading article from the editorial pen are written in exceedingly bad taste, seeing that all the arguments brought forward were carefully weighed and considered at the Lord Mayor's Committee a year ago. But we must not look for noblesse oblige in the editor of such a paper. It is a rarer quality.

The present grievance is that the Governors have applied to the King's Hospital Fund for assistance-a very wise and sensible proceeding; and, by the way, the application was made six months ago. The economic and careful administration of our Hospital was thoroughly vindicated by the Lord Mayor's Committee; and we are still in need of money; that is why the Hospital Fund exists. The Daily Mail objects, because Sir Savile Crossley is the Secretary. What does it matter who the Secretary is? he is only an official. Sir Savile Crossley's personal bias is a matter of insignificance; for, it was he alone out of a committee of sixteen, who was of opinion that the Hospital ought to be removed. He did not stay for all the evidence; and he was wrong. The Daily Mail would lead its readers to suppose that our Governors are asking Sir Savile Crossley for a large sum of money out of his own private income!

The author of the article—obviously misinformed and lacking all sense of proportion—then catalogues a "series of blunders." It seems pitiable that he should condemn the careful and well-considered decisions of the Lord Mayor's Committee as a "series a blunders" without having heard the evidence. The whole article is so paltry, so mean, and so insignificant that we need waste no further time in defending the position of our Governors.

The facts, however, are still the same. The whole Hospital will be entirely reconstructed, but by degrees. It is obviously impossible to rebuild the whole at once; but the scheme is not "indefinitely shelved." Our Governors could not possibly take up such a weak position after all the ceremony and palaver of the Mansion House meeting, and the laying of the Foundation Stone, and the definite approval of the plans. The immediate needs are the same, viz. new casualty, out-patient, and special departments, a new Pathological Block, and a new Nurses' Home (which, by the way, will not "cost at least another £100,000" as the Daily Mail asserts).

Another fact is that the Appeal Fund is only progressing slowly; and of that the *Daily Mail* has made the most, but its deductions are as unsound as its statements are inaccurate. There is enough money to commence the building of the

casualty, out-patient, and special departments; but still we want a millionaire to come forward and build a Pathological Block and a new Nurses' Home. Then the money must still be collected for the rebuilding of the wards and other departments of the Hospital. However, there is no immediate hurry for this part of the scheme, and so the collection is to extend over five years. And this is the reason why the west block underwent its triennial cleaning and repairing this summer, and was incidentally fitted with electric light, at a total cost of under one thousand pounds, a large portion of the plant erected being of course available for removal to a new building.

Our Visitors from France.



N Monday, October 10th, some eighty of the French medical men visiting London were received by the Staff in the Great Hall of St. Bartholomew's Hospital.

After inspecting the various portraits hanging in the Hall, the visitors were taken round the museum, wards, operating theatres, dispensary, and laboratories. Several students, whose knowledge of the French language was of great assistance, had volunteered to lend their aid in this tour of inspection, so that there was no lack of guides for our visitors.

Everybody was charmed with the keenness and courtesy of the distinguished visitors, and with the acuteness with which they followed and appreciated the occasionally laboured explanations of the various pathological specimens, and details of the wards and theatres. It was the experience of many that, what we had always considered a fair working knowledge of French, failed us when we tried to elucidate technical details, but the Frenchmen were so eager to understand and so uniformly polite that everything went off with the greatest success.

Our visitors were loud in their praises for the museum, several of them expressing their surprise at the completeness of the pathological specimens, and at the excellence of their display. Another point that aroused their especial admiration was the comfort and homeliness of the wards, which we have always maintained contrasts very favourably with some of the newer hospitals. The new Coborn Theatre, and the isolation of septic cases were always commented on with marked approval; and the absence of drainage in some of the operations they witnessed gave rise to surprise and admiration in the surgeons. One distinguished surgeon said, finally, that the only explanation he could offer for this difference of practice was that the French peritoneum was different from the English.

After everything had been duly inspected we met once more in the Great Hall to drink tea, and to exchange such compliments as our linguistic powers could exhort or receive,

and a very successful episode was brought to a satisfactory conclusion. Such visits are of the very first importance, emphasising, as they do, the cosmopolitan nature of medical and surgical science, which, whether it be practised in France or in England, has, to a very large extent, common methods for the attainment of one end-the relief of suffering and the cure of disease.

It is with great regret that we have just read of Monsieur Tillaux's death. He was not among our visitors, but he was one of the greatest of French surgeons, and we mark his presence in our

Case of Chylous Fistula following Removal of Caseating Tuberculous Lymphatic Glands: Recovern.

Under care of W. G. CLARK, F.R.C.S.Eng.

ISTORY .- Miss L-, æt. 25, of Bulawayo, with decided tuberculous family history, had a mass of enlarged lymphatic glands in the posterior triangle of the left side of the neck of nine months' duration. The glands were at first separate from one another, but at the time of operation they were nearly all matted together. The patient had undergone climatic and dietetic treatment. but without any effect, as the mass continued to increase in size, and at the time of the operation was about the size of a small orange, and one gland overlapped the clavicle. She was seen by several medical men who all recommended

Operation .- On May 1st, 1904, chloroform was administered, and an incision three inches in length was made over the posterior border of the sterno-mastoid muscle, and a mass of hard inflammatory scar tissue with many caseating centres was incised. It was found impossible to shell out any of the glands from their capsules, and the mass was removed by a tedious dissection, which amounted to removing nearly the whole gland area of the posterior triangle of the neck. The dissection lasted about threequarters of an hour, and the following structures were exposed:-The posterior belly of the omohyoid which was dissected out from the mass; about two inches of the internal jugular vein, which was firmly adherent, and behind which the mass extended with a caseating centre, so that the carotid artery was reached by dissecting behind the vein and its sheath was exposed for about one inch; about one and a half inches of the phrenic nerve were exposed on the scalenus anticus from which the fascia was partly removed, and the brachial plexus. The following structures were not seen :- The lower inch of the internal jugular vein, the subclavian vein, and the thoracic duct. A drainage-tube was left in the centre of the wound. Hæmorrhage was very moderate, but there was some collapse owing to the length of the operation.

Progress of patient.—Vomiting was persistent for two days, as had been the case on a previous occasion after the patient had had chloroform, but after this the patient steadily improved. The highest temperature during convalescence was 99'8°. The pulse was frequent for four days, 110 to 120, but there was no flushing of the face or inequality of the pupils. The respiratory rate was only slightly increased for the first three days. On the nineteenth day the patient was able to take active exercise in the open air, and went for a holiday.

Progress of wound.—The wound was dressed eight hours after the operation, as there had been a considerable escape of blood-stained fluid; this appeared to be lotion and serous exudation. The wound was dressed again forty-eight hours after the operation, and appeared healthy. The tube was removed as the dressings were only partly saturated. On the tenth day the stitches were removed, and there was no sign of suppuration or of any collection of fluid in the wound, although the place where the drainage-tube had been was not quite healed. On the fifteenth day some fluid was detected at the upper part of the wound, and was let out by the introduction of sinus forceps through the place where the drainage-tube had been; it was nearly clear and yellowish. On the sixteenth day about two ounces of fluid had collected. This was proved to be chyle, having the naked-eye appearance of milk, clotting on exposure, and under the microscope showing the molecular basis of chyle as well as red and white corpuscles. On the seventeenth day eight and a half drachms were removed, and on the nineteenth day seven drachms were removed. On the twenty-sixth day the patient returned from a week's holiday, during which time one to two drachms of fluid were removed at the daily dressing. On the thirty-eighth day the wound was quite healed, and but a very small swelling remained in the neck. There had never been any sign of pus.

After history (July 18th).—The patient has been steadily improving in health and gaining in weight. There is no sign of fluid in the neck.

Remarks.—The situation of the thoracic duct was carefully avoided at the time of operation, and making due allowance for the possible displacement of the duct this vessel can hardly have been wounded. The most noteworthy features are:

- 1. The late appearance of any chyle in the wound.
- 2. The small and diminishing quantity which appeared.
- 3. The steady improvement of the patient, and her ultimate recovery from this complication.

It seems probable that a lymphatic trunk had been divided near its junction with the thoracic duct, and that the chyle escaped from this vessel and not from the main duct.

One View of Teprosp.

By ERNEST WARD LOWRY, F.R.G.S.



T was night! Indeed, it is seldom otherwise where December day is but the watch between 10 a.m. and 2 p.m. For ten days we had sledged north-

east of the "last city in Europe," as the Russian calls Mezen; to the south we had left houses, rye, potatoes, and trees worth felling for their timber, and entered a zone between them and the boundless tundra of the north,—a transitory land, where great trees dwindle into shrubs and shrubs to creeping willows, where Zirian separates the Russian of village, plough, and cattle, from the Samoyede of reindeer, fish, and fur. It was night, and I was fast asleep on the moss covered floor of my sledge; windless arctic silence, save for the sharp click of cloven deer hoofs as they rose from the beaten snow track.

Suddenly the flying team swerves and upsets sledge, luggage, driver, interpreter, and self into the soft snow which bounds the track on either hand. It is better to sideslip on snow than on asphalt, and I am soon grasping at my rifle, for wolf alone, I think, can have caused the well-trained deer to shy. The Samoyede driver pushes my barrel aside: "Leper," he shouts, and proceeds to right the sledge and quiet the deer. Quaint little Mongolian deerherd, four foot nothing in height, and nearly as much in furwrapped diameter; he drinks too frequently of deer blood to dread leprosy as his fish-fed cousin the Yakoot does.

For full a minute I see nothing in the arctic gloom. Then the fitful aurora shows a tiny figure kneeling at the trackside. Male or female? I cannot tell, for arctic fashion does not differentiate, and clothes us all in deerskin: but it makes the sign of the cross-Tzarland's equivalent for Judean "Unclean, unclean"—with a square hand from which the fingers are mostly gone, and the white aurora light is reflected from hairless brows and from a nose that is mostly a thing of the past.

My interpreter, a Russian, speaks a little sailor-Saxon, picked up in the timber port of Salombo; and between us we elicit facts, which are communicated in a voice only comparable to that of the dread American Gramophone. The figure is a woman, a Russian, twenty years outcast; lives with two men in a log hut, a mile from the track; has two children, who, although born of lepers, are healthy. "Are not we Terchnovic-officials? Will not we compel the priest to baptise them?" Why does not the figure stand? It cannot, it has no toes. Why is it out at midnight? It is fetching the food supply, left once a week at a milestone on the post road by the Mir, or village commune, who by law must support their "unfortunate," be they leper or lunatic; and it points to the skin bag trailed by a thong behind it. What does the bag contain? Rye bread, "tresca"-last year's codfish,-brick tea, and, the much-taxed luxury, salt.

A thoughtless offer of a rouble note brings no gleam to those lashless eyes. "Who would take money from a leper?" No! Money is very little good if one cannot get rid of it, so I offer to leave provisions at the hut. The deer have scraped away the snow at the trackside and are munching the lichen beneath it, so it seems a good time for a halt, and, leaving the Samoyede to make up a meal, and the woman to follow on, I fix my snowshoes and start for the leper colony.

The bark of a dog guided me to a ten-foot square hutch, at the door of which were standing two children and two wretched men, all covered with dirt and rags of deerskin. The hut stood in a sheltered spot, its walls supported by a few stunted larches-a sign than fresh water can be got in summer. No one had visited the place since, years ago, a figure-loving bureaucracy had sent to number them, and this was all the government had done for the arctic zone until quite recently. I looked into the den, and took the following inventory: a central fire of sticks on a floor of filth, a hornless deer calf, some fowls, for eggs are twopence a dozen, and quite fresh at that, a hole in the roof contrived for twofold purpose, a window and a chimney shaft in one. No table, but round the wall are shelves on which to sleep and eat, and from the ceiling hangs a festoon of drying fish. Later I learnt that there were parasites peculiar to man; there was also a smell. The elder man, who was not nearly so diseased as the poor woman whom he had sent out to fetch the weekly bag of food, showed me a gun, and explained that his greatest want was powder, the current coin of the tundra, and with this I was able to satisfy him. He knew of the winter quarters of a brown forest bear, but even bear will not tempt one to go shooting with a leper.

At the next post house—post roads link up the Black with the White and Yellow Seas, and every wayside village contributes its quota of horses, deer, or camel, at fixed fares, to this ubiquitous system,—I asked many questions. The lepers were all members of one village some fifty miles southward. Only the five were now known to exist in the district; one had gone mad and been lost, several had died, but, translated my companion, "lepers very fertile." Could not the children be returned to their village? "No," said the police master, "they will have throats at ten, and other symptoms at thirteen, but they are to be sent to the leper settlement beyond Ust Tzilma."

Two causes for the disease were given by the Feldsher, or "medical assistant," as the blue book styles him, stagnant, brackish water, and lack of salt. Tresca, the main food of the Mujik, who never lives far from water, is an evil-smelling product. It consists of cod, salmon, or other common fish salted and buried in sand. The inland poor cannot afford the salt, and so eat the fish merely rotten. It is noteworthy that the native names lack of salt, and the text-books salt, as the cause; and that the Ostiac

and Pommor, who are the "longshoremen" of the Arctic Ocean, and make their own salt by evaporation, do not even know of the disease.

A huge Mujik, passing that way with a train of sledges, shared with us the post house fire. He crossed himself ere he gave vent to the popular opinion that lepers do not feel cold (in the anæsthetic stage?), that they often live to a good age, and never die of the disease itself, that their children show no sign until about thirteen (puberty in eastern Russia), that the throat is the first part attacked, that five lepers were a heavy tax on one small village, and that there was no fresh water in that village like the springs of its neighbours, where there was no disease.

The "Feldsher" is in himself a curious product. Nearly always a shoeing smith retired from the cavalry, or a sick bay man from the navy, he, with the full recognition of the government, becomes the "vet." and physician of some huge tract of sparsely populated land, where a qualified man could not pick up a living. I once overheard myself referred to as "Feldsher" by a Polish Jew, whom I was dressing in the surgery. A grandmotherly government restricts the materia medica of the Feldsher to a few harmless preparations, so perhaps it was the list in the Duty Room which reminded the Pole of his native land. The fee of the Feldsher is always paid in kind. If he "doctors" a litter of pigs he receives one of their number, while, should he draw the tooth of the miller, he draws his pay in flour. The Pole, however, brought no offering to his dresser, - he had noted one distinguishing point in the English system.

From the Letters of a Medical Student,

1829, 1830.

(Continued from p. 13.)

I. FROM DUBLIN.

March 21st, 1830.—We have had plenty of subjects, and they are still coming in when wanted. The doctor has nearly finished his demonstrations, and is going on lecturing on physiology, surgery, and pathology, as usual. I was talking to him one day about the Sheffield Infirmary, and he said it was one of the nicest infirmaries he had seen.

I was at the hospital to-day, and had a good deal of conversation with Mr. Cusack. He does not go regularly round the hospital, but merely to such patients as are very ill, on Sundays, so that there is time to have a good deal of conversation. We had a brachial aneurism a few days ago, which he attempted to cure by pressure, as they have done several times during the last year. It was after bleeding, the artery being pierced. The sac ruptured, however, and effusion took place. The man was kept

longer, I think, than was prudent after the bursting of the sac, but was last Monday operated upon. There was a good deal of inflammation about the arm, and Mr. Cusack and Mr. Colles differed very much as to where the artery should be tied. Mr. Cusack said, tie it at the place with two ligatures. Mr. Colles recommended the operation to be performed high up, and whether out of a spirit of contradiction or not I do not know, but he said there was no danger of hæmorrhage, and they could not get him to make any allowance for the collateral circulation. A consultation was summoned, and Crampton, Peile, and Wilmot were with Mr. Cusack, and consequently the operation was performed at the bend of the elbow. A large quantity of coagulation was turned out, and the artery tied, and the man is doing pretty well, and if they had applied water dressing I think would have done still better.

A poor man was brought in the other night who had been beaten by a woman over the head to such a degree that he only lived a few hours. On examination the skull was not fractured, but a quantity of blood was found effused between the dura mater and arachnoid tissue; and one of the lads told me, but I can hardly imagine such a thing taking place without fracture, that he thought the lateral sinus was ruptured. He was in a state of beastly intoxication at the time of the occurrence, and the sinus might be full of blood. We have another case of a man walking quietly along the road, and he met a party of men who turned out to be, as our porter calls them, "Friends to Science"-vulgariter Sackemups or Resurrection, men-one of whom came from the rest and cut the poor fellow down with a sword. It was a remarkably clean cut through the scalp and skull, through the dura mater, and into the substance of the brain. There is suppuration in the brain, rather diminishing, but he is in a very precarious state, perfectly sensible, and has been so ever since the accident. He is rather better at present.

Dr. Montgomery lecturing away. I am expecting two or three more cases in about a week's time, but they have been very scarce since the establishment of the Coombe Hospital.

II. FROM LONDON.

"BABYLON THE GREAT,"
17, GOUGH SQUARE,
FLEET STREET.

June 5th, 1830.—I found my way to Blackfriars Bridge, and had the ill-luck to see the River Thames for the first time with the tide just run out, which gives a most miserable appearance to any river. I then strolled about to lose myself, and saw St. Paul's, the Post Office, the Old Bailey, St. Bartholomew's Hospital, Smithfield; indeed, we passed through the latter. I got home about half after seven sadly tired, for I did not get any sleep during the night,* and I had only a few nods in the day;

and a little after eight I turned into bed, and slept till halfpast seven this morning, and had only one sleep of it you may be sure. Got breakfast, and a little before ten went to Aldersgate Street to hear Pereira lecture on "Chlorine Gas." I was very much pleased with his manner of lecturing. He appeared rather quick in delivery, but is very distinct. He is a nice-looking young man, and his lecture was very plain, and he seemed to be anxious in impressing everything of importance on the minds of his audience. His class consisted of about thirty this morning. He recommended me to get Turner's Chemistry and a translation of Reichard's Botany, and also to a bookseller's where I could get them cheaper than at other places. He did not know of any lodgings, but told me where to look for them—in Edmund Square, a little further up, between the General Dispensary and the Aldersgate Street School, where Mr. Waller lectures on "Midwifery." Dr. Jas. Blundell does not lecture in summer. Dr. Conquest and Mr. Waller lecture together in winter, but Waller only in summer. His terms are three guineas, and he supplies cases, so I think I shall enter. He lectures from nine to ten in the morning, Tuesdays, Thursdays, and Saturdays. It is only a short distance from Pereira's place, and in that respect will suit very well. I called at his house, 93, Bartholomew Close, but he was not in. I made a miss in going to Moorfields, and could not find the place I wanted, the Eye Infirmary, and turned towards Cheapside, and called on Ed. Sambourne, who went with me into Edmund Square to see the lodgings.

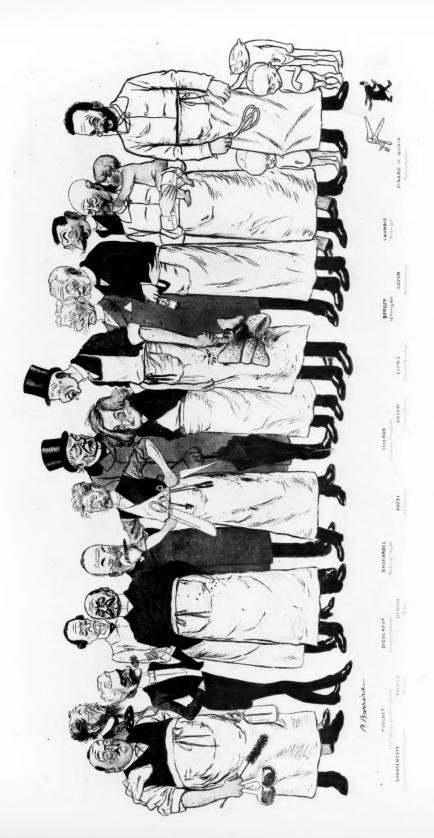
29, EDMUND PLACE,
ALDERSGATE STREET.

JUNE 12th, 1830.—I can now give you some account of myself, as I am nearly settled in my abode. On Monday and Friday mornings at eight o'clock I go to hear Pereira lecture on "Botany." On Tuesdays, Thursdays, and Saturdays I go to hear Waller on "Midwifery" from nine to ten, from ten to eleven Pereira on "Chemistry," and from half-past twelve to two or half-past at the Eye Infirmary. I entered for three months on Thursday; paid five guineas to Mr. Tyrrell. I told him whence I came, and he asked a good many questions about Mr. Waterhouse,* Mrs. Rodgers, and said he should be glad if I could get him any information respecting her, which I will be obliged to you to do for me. He should be glad to see me on Sundays at St. Thomas's. I liked him very much at the Infirmary. He explained many things as he went on, and there are a great number of patients. I was there today, and Scott also was very free in his communications, pointing out anything which seemed interesting. On Wednesdays I intend to go to the Gardens at Chelsea, where I understand a lecture is given, and a ticket may be obtained at Apothecaries' Hall by asking for it.

I get my breakfast of coffee at eight or nine o'clock

^{*} The previous night had been spent in the coach.

^{*} Thomas Wakehouse, of Sheffield, surgeon, 1793-1830.



"LA GUERRE CONTRE LE MICROBE."

Vétérans de l'armée hostile en préparant pour le bataille.

From the drawing presented to the Students of St. Bartholonnew's Hospital by our Visitors from France.